



# The Switch List

**Friend**  
BANKING TRUE TO YOU

## To close an account and transfer any remaining funds, you will need:

- Recent bank statement with your existing bank account number(s)
- New Friend Bank account number(s)
- Friend Bank routing number: 062102221
- Form 1—Account Closing Notification
- Follow up to ensure all checks have cleared on your existing account
- Double check maturity dates if transferring a Certificate of Deposit in order to avoid possible penalties

## To change your payroll or direct deposit, you will need:

- New Friend Bank account number(s)
- Friend Bank routing number: 062102221
- Form 2—Direct Deposit Request

## To change your Social Security Direct Deposit, you will need:

- New Friend Bank account numbers
- Friend Bank routing number: 062102221
- Visit [www.ssa.gov/deposit/howtosign.htm](http://www.ssa.gov/deposit/howtosign.htm) or call 1-800-772-1213 to change your social security deposit

## To change your automatic payment or withdrawal, you will need:

- Recent statement from merchant/company
- New Friend Bank account number(s)
- Friend Bank routing number: 062102221
- Form 3—Automatic Payment Request
- Complete a form for each merchant/company that debits money from your account

## To change your online payments and/or set up Friend Bank Bill Pay, you will need:

- Recent statement from merchant/company
- Form 4—Friend Bank Bill Pay Checklist



FORM I

# Account Closing

**Friend**  
BANKING TRUE TO YOU

To: \_\_\_\_\_

Bank Name \_\_\_\_\_ Bank Address \_\_\_\_\_

Bank City \_\_\_\_\_ Bank State, Zip \_\_\_\_\_

Account Number \_\_\_\_\_  Checking  Savings  Money Market  Other

Account Number \_\_\_\_\_  Checking  Savings  Money Market  Other

Account Number \_\_\_\_\_  Checking  Savings  Money Market  Other

Account Number \_\_\_\_\_  Checking  Savings  Money Market  Other

Please send any remaining funds in the accounts listed to the following address:  
Friend Bank, Post Office Box 640, Slocomb, AL 36375

Deposit Instructions:

Deposit entire amount to checking/savings account number: \_\_\_\_\_ OR

Deposit \$ \_\_\_\_\_ to checking/savings account number: \_\_\_\_\_ AND

the remainder to checking/savings account number \_\_\_\_\_ .

From:

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_

State, Zip \_\_\_\_\_ Telephone Number \_\_\_\_\_ SSN# \_\_\_\_\_

I authorize:

- The listed entity to close the account(s) listed here.
- The transfer of funds to my Friend Bank checking and/or savings account(s)
- Friend Bank to credit deposits to my account(s) as specified

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



FORM 2

# Direct Deposit Request

**Friend**  
BANKING TRUE TO YOU

**To: Payroll Department**

Employer/ Company Name: \_\_\_\_\_

From: \_\_\_\_\_

Social Security #: \_\_\_\_\_

**Subject: Payroll Direct Deposit**

Date: \_\_\_\_\_

- Establish new authorization for Direct Deposit
- Change my existing authorization

**Deposit Instructions:**

Deposit entire amount to checking/savings account number: \_\_\_\_\_ OR

Deposit \$ \_\_\_\_\_ to checking/savings account number: \_\_\_\_\_ AND

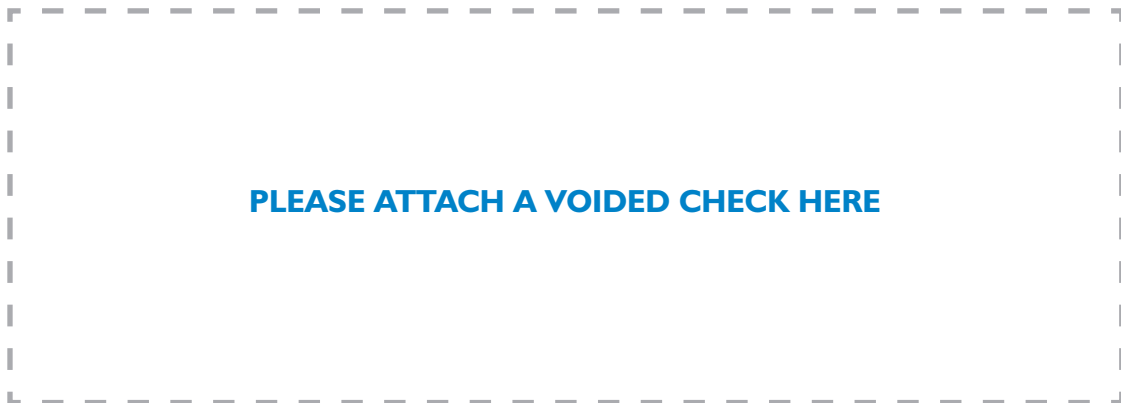
the remainder to checking/savings account number: \_\_\_\_\_ .

Friend Bank Bank Routing#: 062102221

I authorize:

- The listed employer/company to change deposits of my funds to my Friend Bank checking or savings account.
- Friend Bank to credit funds to my account(s).
- This authorization to remain in effect until I provide written notice of change or cancellation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





# Automatic Payment Request



- Establish Automatic Payment
- Change my existing Automatic Payment

**Automatic Payment Information:**

Company Name: \_\_\_\_\_

Company Account #: \_\_\_\_\_

Payment Amount: \$ \_\_\_\_\_

**Personal Information**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

**Banking Account Information**

Account Type:  Checking  Savings  Money Market

Friend Bank Account #: \_\_\_\_\_

Friend Bank Routing#: 062102221

**I authorize:**

- The Company listed to initiate withdrawal of my funds from the above Friend Bank Account
- Friend Bank to debit funds from my account
- This authorization to remain in effect until I provide written notice of change or cancellation

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



FORM 4

# Bill Pay List



## We've made it easy to move all your online payments to Bill Pay!

Just use this helpful checklist to remember all the bills you currently have. If you don't already have online payments set up to any of the merchants/companies below, now is the time to do so! Bill Pay is a powerful tool for managing monthly payments, and it's FREE with your Friend Bank personal checking account!

- |  |  |
|--|--|
| <input type="checkbox"/> Mortgage/Rent                   | <input type="checkbox"/> Auto Club (AAA, Onstar, etc.)   |
| <input type="checkbox"/> Home/Renter's Insurance         | <input type="checkbox"/> Gym Membership                  |
| <input type="checkbox"/> Auto Loan /Lease                | <input type="checkbox"/> Credit Card                     |
| <input type="checkbox"/> Auto Insurance Department Store | <input type="checkbox"/> Credit Card                     |
| <input type="checkbox"/> Health/Life Insurance           | <input type="checkbox"/> Loans (Personal, Student, etc.) |
| <input type="checkbox"/> Electricity/Gas Company         | <input type="checkbox"/> Transportation/Parking          |
| <input type="checkbox"/> Water                           | <input type="checkbox"/> Savings/Investments/Annuity     |
| <input type="checkbox"/> Magazine Subscription           | <input type="checkbox"/> Cable TV                        |
| <input type="checkbox"/> Home/Cellular Phone             | <input type="checkbox"/> Other _____                     |
| <input type="checkbox"/> Long Distance                   |  |